

THINK TWICE BEFORE VOLUNTARILY SURRENDERING YOUR LICENSE!!!!

The Idaho Department of Insurance urges producers to allow their individual Idaho licenses to lapse rather than requesting a Voluntary Surrender except in cases where a [clearance letter](#) is necessary. **Idaho does not have penalties for a lapsed license if you are no longer doing business in Idaho.**

In lieu of a Voluntary Surrender, a license record can be removed from the Department website, if desired, without deactivating the license. Active appointments can be removed and all address information can be converted to the licensee's place of residence. Updating your contact information is requested at the time of the request through [NIPR](#).

Appointments must be in place to do business in Idaho; however, appointments are not required to keep a license active while *not* doing business. If no insurance business is transacted in Idaho while the licensee is inactive, Idaho does not penalize for nonrenewal.

Producer appointments can be terminated by completing a [Termination Form](#). Companies must terminate appointments through their online vendors.

Online license reapplication and reinstatement are both available for non-residents whose licenses have been allowed to *lapse*.

Producers still wishing to voluntarily surrender their Idaho licenses should complete the second page of this form (including notarization) and forward it to agent@doi.idaho.gov for processing. Once processed, no online services will be available to reinstate or reapply and the license expiration date is moved forward to the effective date of voluntary surrender—which means reactivation of the license requires the [paper reinstatement form](#) and fees up to one year past the voluntary surrender date. After one year, reapplication, also using a paper form, is required.

EXEMPTIONS: Loss of home state license/retirees/business entities/voluntary surrender for clearance to move to another state/Surplus Lines licensees. Please request forms specific to your circumstances for voluntary surrender.

Contact Producer Licensing at agent@doi.idaho.gov with questions.

REQUEST FOR VOLUNTARY SURRENDER OF IDAHO LICENSE

Name: _____ License Number/NPN: _____

Please process my request to Voluntarily Surrender my insurance license from the State of Idaho, effective: _____. Please send confirmation to:

Email address: _____

In the event of any questions regarding this request, please provide a phone number.

Phone: _____

Please Initial that you have read and agree to each statement below:

_____ I have read and understand the recommendation to allow my license to lapse and agree to the terms of a voluntary surrender. The terms include that my expiration date becomes the date of my voluntary surrender and that, should I wish to reactivate my license within 365 days past that date, I will be required to pay a reinstatement fee of \$160 and reactivate through a paper process using the appropriate Department forms.

_____ I am the person holding/responsible for the license number referenced above, issued by the Idaho Department of Insurance, and the said license has been destroyed. I hereby declare that I consider the said license to be void and of no effect.

Dated this _____ day of _____, _____.

Signed: _____
Signature of Licensee

SUBSCRIBED AND SWORN to before me this _____ day
of _____, _____.

Notary Public
In and for the State of _____
Residing at _____
My Commission Expires _____

Please fax this completed form to **208-334-4398** or email to agent@doi.idaho.gov for processing.

Please contact us at this email address if you have any questions.